

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:	Hermans et al.)	Examiner:	Fortuna, Jose A
Serial Number:	10/749,476)	Group Art Unit:	1791
Filed:	December 31, 2003)	Customer Number:	22827
Confirmation No.:	3935)	Deposit Account:	04-1403
Title:	"Two-Sided Cloth Like Tissue Webs")		

RESPONSE TO NOTICE OF ALLOWANCE AND FEE(S) DUE


Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Respectfully submitted for filing is the Form PTOL-85 Part B – Fee(s)
Transmittal and authorization of payment for the issue fee and publication fee in the
amount of One Thousand Seven Hundred Forty dollars (\$ 1,740.00) for the above-
identified patent.

Respectfully submitted,

DORITY & MANNING, P.A.



Alan R. Marshall
Registration No. 56,405

August 4, 2008

Date

I hereby certify that this paper and all attachments
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DATE: August 4, 2008

NAME: Heidi M. Lewis

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Complete and send this form, together with applicable fee(s), to: **Mail** **Mail Stop ISSUE FEE**
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22827 7590 05/05/2008

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See Attached Certificate of Electronic Submission	(Depositor's name)
	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/749,476	12/31/2003	Michael Alan Hermans	KCX-755 (18853)	3935

TITLE OF INVENTION: TWO-SIDED CLOTH LIKE TISSUE WEBS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$1740	08/05/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
FORTUNA, JOSE A	1791	162-112000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Kimberly-Clark Worldwide, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Neenah, Wisconsin

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

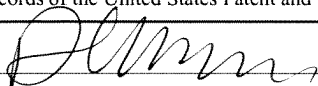
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Date August 4, 2008

Typed or printed name Alan R. Marshall

Registration No. 56,405

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